SHIFT COACHING AGREEMENT

Pastor’s Name:

Congregation:

Coach:

The Initial Coaching Term is 6 months: From: To:

One additional term may be approved for up to one year.

During this time you or Congregation agree to pay $100 for the first 6 months of coaching. The congregation will provide reimbursement of all coaching related expenses (mileage, meals, housing, materials) as needed.

Coaches and coachees agree to at least two 30-45 minutes calls or visits per month with email contact and short conversations in between as needed.

1. I understand that coaching is a relationship I have with my coach designed to facilitate the creation or development of personal and/or ministry goals. Coaching will help my congregation and me develop and implement a strategy for achieving those goals.

2. I understand that the role of the coach is to help me live out my calling, both personally and professionally. I expect this to lead to an improved sense of satisfaction in ministry and in life along with an improved quality of life.

3. I understand that coaching is a comprehensive process that may involve many areas of my life and the congregation’s life. I am willing to engage coaching in each area as it is relevant to the process. I acknowledge that decisions around these issues are exclusively my responsibility.

4. I understand that coaching is for people and congregations that are basically healthy and well-adjusted and where there is a feeling of hope for the future.

5. I understand that the Shift Coaching Initiative is not designed at this time to address significant church conflicts. If a significant conflict erupts, the coaching relationship will be suspended until the conflict is resolved.

6. I will not use coaching in lieu of professional advice in various areas. Example: Financial, Medical, Legal, etc.

7. I understand that coaching is a confidential relationship, unless noted in writing by me. Confidentiality is limited in accordance with the laws of this state. Exceptions to
confidentiality are child abuse, elder abuse, certain illegal activities, and intent to harm self or others.

8. I also understand that my coach and I will be asked by the Wisconsin Conference to check in periodically about our work together. My coach and I will work together on these check-ins.

9. I agree to complete an evaluation about this coaching experience and to be open with my coach if concerns arise.

I have read and agree to the above. I have also read and agree to abide by the Policies and Procedure provided to me by the Wisconsin Conference.

Signature ________________________________

Date ________________________________